Disclosur	e Report	Cover
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Amendment

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

. Full Name		
		c. ID Number
Committee to Elect	Anne Pritt	
. Mailing Address (include City, State and Zip Code)		d. Date Filed
PO BOX 77172	(0/25/2019	
Charlotte NC 282	71	e. Phone Number
Charlette de 202	-/	704604287
Report Year 3. Period Start Date (mm/dd/yy) 4. P	eriod End Date (mm/dd/yy) 5.	Freasurer Full Name
2019 Jan 1, 2019 1	0/22/2019/	Anne Pritt
	of Report (check only one typ	
Candidate Campaign Party Municipa PAC Referendum Orga	d State/County inizational Organizationa	Referendum Organizational
	y-five day Quarterly	Pre-referendum
	primary First	☐ Final
Pre-e	The state of the s	Supplemental Final
10 11	unoff Third	Annual Special
	Mid Year Semi-annual	Special
1=	Year End Mid Yea	10. Special Report Name
Other: Final		
S. Number of Fundraisers this Report Spec	-	
	☐ Special	
1. Account Information . Financial Institution Full Name	11. Account Informat a. Financial Institution Ful	
	ion	
Purpose c. Account Code	b. Purpose	
	b. rurpose	c. Account Code
(general (amp. TECH.		
General Camp, TFCV. d. Period Begin Balance \$ 544,00	Carried Control of Con	d. Period Begin Balance
KUUVVI \$544.00)	 \$
CERTIFICATION		
CERTIFICATION I certify that the Committee or Fund is in compliance with		22A, 22B & 22D-22M of Chapter 163
CERTIFICATION I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming	gled with prohibited or other non-d	e 22A, 22B & 22D-22M of Chapter 163 isclosed funds. I further certify that this
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been true.	gled with prohibited or other non-d	e 22A, 22B & 22D-22M of Chapter 163 isclosed funds. I further certify that this ections.
CERTIFICATION I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming	gled with prohibited or other non-d	e 22A, 22B & 22D-22M of Chapter 163 isclosed funds. I further certify that this
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been to Printed Name of Signer	gled with prohibited or other non-d	e 22A, 22B & 22D-22M of Chapter 163 is closed funds. I further certify that this ections.
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been to the Section of the NC PWH.	gled with prohibited or other non-dained by the NC State Board of Ele	22A, 22B & 22D-22M of Chapter 163 is closed funds. I further certify that this ections. 10 25 2019 Date
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been true. Printed Name of Signer FOR OFFICE USE ONLY	gled with prohibited or other non-dained by the NC State Board of Ele	22A, 22B & 22D-22M of Chapter 163 is closed funds. I further certify that this ections. 10 25 2019 Date Delivery Method
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been true and correct and that I have been to Printed Name of Signer FOR OFFICE USE ONLY Date Received:	signature of Appointed Treasure Employee:	22A, 22B & 22D-22M of Chapter 163 isclosed funds. I further certify that this ections. 10 25 2019 Date Delivery Method Normal Mail
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been true and correct and that I have been to Printed Name of Signer FOR OFFICE USE ONLY Date Received:	sled with prohibited or other non-dained by the NC State Board of Ele	22A, 22B & 22D-22M of Chapter 163 is closed funds. I further certify that this ections. 10 25 2019 Date Delivery Method
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been true and correct and that I have been to Printed Name of Signer FOR OFFICE USE ONLY Date Received:	Signature of Appointed Treasure Employee:	22A, 22B & 22D-22M of Chapter 163 isclosed funds. I further certify that this ections. 10 25 2019 Date Delivery Method Normal Mail Registered Mail
I certify that the Committee or Fund is in compliance with of the NC General Statutes and that no funds are comming report is complete, true and correct and that I have been true. Printed Name of Signer FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned:	signature of Appointed Treasure Employee:	22A, 22B & 22D-22M of Chapter 163 isclosed funds. I further certify that this ections. 10 25 2019 Date Delivery Method Normal Mail Registered Mail Hand Delivered

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number			
Committe to Elect Anne Pritt Pre-Election.						
Start of Election Cycle: January 1, 2019	-	Total this Reporting Period	Total this Election Cycle			
4) Cash on Hand at Start		\$ 544.00	9 \$			
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$			
6) Contributions from Individuals	(CRO-1210)	\$\	\$			
7) Contributions from Political Party Committees	(CRO-1220)	\$ \	\$			
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$			
9) Loan Proceeds	(CRO-1410)	\$	\$			
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$			
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$			
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$			
11c) Outside Sources of Income	(CRO-1250)	\$	\$			
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$			
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$			
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 544.00) \$			
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 32.99	\$			
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ /	\$			
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$			
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$			
15) Loan Repayments	(CRO-1420)	\$	\$			
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$			
17) In-Kind Contributions	(CRO-1510)	\$ /	\$			
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1.	5, 16 and 17)	\$ 32.99	\$			
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 511.01	\$			
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ \				
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$				
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$				
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$				
24) Account Transfers Within the Committee V	(CRO-1720)	\$				
25) Administrative Support OCT 2 8 2019	(CRO-1710)	\$	\$			
26) Forgiven Loans	(CRO-1440)	\$	\$			
27) 48-Hour Notice Reports Sumon Co. Board of Elections	(CRO-2220)	\$	\$			
28) Contributions to be Refunded	(CRO-1215)	\$	\$			

	report expenditures coordinated party ex		tee for o	perating exp	enses, contribu	itions to candida	te/political
	Full Name (and Fun					2. ID Nu	mber
Comm	nitte to E	lect Any	1er	nitt			
3. Type of Dish	AND RESIDENCE OF THE PERSON OF	e use separate CR	and the latest termination of	AND DESCRIPTION OF THE PERSON NAMED IN	ach type of Di	sbursement.)	
Operating Exp		ntributions to Candida			and the second	oordinated Party Ex	penditures
4. Payee Inform	mation		X	Add	Remove		
a. Full Name, M	Mailing Address & Pl	none	10-11	b. Coordinate	ed Committee Na	me d. Commer	nts
(include city, state	, & zip)						
Weenly. com			c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date				
				State	Munic		Sum to Date
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		k. Required Re	marks
TECU.	CC	\bigcirc	101	10/19	\$ 32,90	7 Wens	ite.
					\$		
4. Payee Inform	mation			Add	Remove		
PRODUCT PRODUCT AND ADDRESS OF THE PARTY OF	ling Address & Phone				ed Committee Na	me d. Commer	nts
(include city, sta							
	700000000000000000000000000000000000000						
				c. Level Regi	stered (Specify)		
				Federal	County		
				State	Munic	ipality: e. Election	Sum to Date
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Re	marks
		1			\$		
					\$		
4. Payee Infor	- otion			Add			
	ling Address & Phone				Remove ed Committee Na	me d. Comme	
(include city sta	AND DESCRIPTION OF THE PARTY OF			b. Coordinat	ed Committee Na	me d. Comme	iis
nct	2 8 2019			c. Level Regi	stered (Specify)		
001	2 0 2010			☐ Federal	County	y:	
Union Co. P	toard of Elections			State	Munic	ipality: e. Election	Sum to Date
Official Society	ogai a oi aire					\$	
		I					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Re	marks
					\$		
					\$		
5. Total only th	his Page					\$	
6. Total of AL	L CRO-1310 Pages						
MATERIAL WILLIAMS TO SELECT	n line 13a of Detailed Su	mmary Page CRO-11	100 if Ope	erating Expens	es)	4	
	n line 13b of Detailed Su	The second secon				<i>im</i>) \$	
	n line 13c of Detailed Su						
7. Purpose C	Codes (List detaile	d expenditure cod	e in (h.)	above)			
A* - Media	B* - Print			undraising	D - T	o Another Cand	idate
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office							
I - Postage						CONTRACTOR OF THE PROPERTY OF	
O* Other							
* Codes requi	re detailed explana	tion in required	remark	s field (k)			

Disbursements

Amendment

☐ No

☐ Yes